



HAWAII STATE ETHICS COMMISSION ORGANIZATION'S OR INDIVIDUAL'S EXPENDITURES AND CONTRIBUTIONS REPORT

(To be filed by organizations, employing organizations and individuals
other than registered lobbyists)

FORM ORG

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HAWAII STATE ETHICS COMMISSION
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STATE OF HAWAII
STATE ETHICS COMMISSION
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For lobbying reporting period:

[☒] January 1 - last day of February

[☐] March 1 - April 30

[☐] May 1 - December 31

Year of Report 2005

Contact person

Organization

Mailing Address

Phone

Steve Hoag
Hawaii Reserves, Inc.
55-510 Kam. Hwy.
Laie, Hawaii 96762
293-9201

PART I. TOTAL EXPENDITURES

The total sum or value of all expenditures for the purpose of lobbying during the statement
period was: \$ 2,822.10

EXPENDITURES

| Category | Total Amount | Category | Total Amount |
|--|--------------|-------------------------|--------------|
| 1. Preparation & distribution of lobbying materials | | 7. Entertainment | |
| 2. Media advertising | | 8. Food & beverages | |
| 3. Telegraph, telephone and other forms of telecommunication | | 9. Gifts | \$ 44.28 |
| 4. Postage | | 10. Loans | |
| 5. Compensation paid to lobbyists | \$ 2777.82 | 11. Other disbursements | |
| 6. Fees (other than to lobbyists) | | TOTAL EXPENDITURES | \$ 2,822.10 |

COMPENSATION PAID TO LOBBYISTS

List in this section the names of all lobbyists and compensation paid to the lobbyists during the statement period.

| Name | Address | Compensation paid |
|--|---|-----------------------------------|
| Rosehill & Assoc. | 1088 Bishop St., Suite 1010 Honolulu, Hawaii 96813 | \$ 2,414.62 |
| Steve Hoag, Employee of Hawaii Reserves, Inc. | 55-510 Kam. Hwy. Laie, Hawaii 96762 | \$ 363.20 \$ 363.20 |
| | | |
| | | |

EXPENDITURES OF \$25 OR MORE PER PERSON PER DAY

List in this section all expenditures incurred for the purpose of lobbying of \$25 or more per person per day during the statement period.

☐ This section is not applicable

☐ Expenditures incurred in the total sum of \$25 or more per person per day were made for the following persons:

| Name & Address | Amount or value |
|----------------|-----------------|
| | |
| | |
| | |
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| | |

AGGREGATE EXPENDITURES OF \$150 OR MORE PER PERSON

List in this section all expenditures incurred for the purpose of lobbying in the total sum of \$150 or more per person during the statement period.

☐ This section is not applicable

☐ Expenditures incurred in the aggregate of \$150 or more per person were made for the following persons:

| Name & Address | Amount or value |
|----------------|-----------------|
| | |
| | |
| | |
| | |
| | |

PART II. CONTRIBUTIONS RECEIVED

List in this section all contributions received for the purpose of lobbying in the total sum of \$25 or more per person during the statement period.

☐ This section is not applicable

☐ Contributions received in the total sum of \$25 or more per person were received from the following persons:

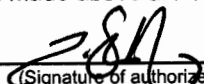
| Name & Address | Amount or value |
|----------------|-----------------|
| | |
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PART III. SUBJECT AREAS OF LOBBYING

Legislative and/or administrative action in the following areas was supported or opposed during the statement period:

- | | | | |
|---|---|---|---|
| <input type="checkbox"/> Agriculture | <input type="checkbox"/> Education | <input type="checkbox"/> Human Services | <input type="checkbox"/> Science, Technology & Economic Development |
| <input type="checkbox"/> Communications & Public Utilities | <input type="checkbox"/> Government Operation & Finance | <input type="checkbox"/> Intergovernmental Relations, International Affairs | <input type="checkbox"/> Tourism & Recreation |
| <input type="checkbox"/> Consumer Protection & Commerce | <input type="checkbox"/> Hawaiian Affairs | <input type="checkbox"/> Labor & Employment | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Culture, Arts, Historic Preservation | <input type="checkbox"/> Health | <input type="checkbox"/> Planning, Land & Water Use Management | <input type="checkbox"/> Other: (indicate below) |
| <input type="checkbox"/> Ecology, Energy Environmental Protection | <input checked="" type="checkbox"/> Housing | <input type="checkbox"/> Public Safety & Corrections | |

I hereby certify that the statements made above are correct and complete to the best of my knowledge


(Signature of authorized person)

3/31/05
(Date)

Name of authorized person (type or print)

Title of authorized person

Steve Hwang
Dir. of Human Resources & Asst. to the Pres.